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| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET | | | | Application Number 10/530,643 | | Filing Date 07 April, 2006 | | <input type="checkbox"/> To be Mailed | | | | |
|---|----------|--------|--------------------------|----------------------------------|---------------------------------------|-------------------------------|-------|---------------------------------------|-------|--------|-------|--------|
| | | | | Applicant(s) CAYOUETT ET AL.. | | | | Page 1 of 3 | | | | |
| * May be used for additional claims or amendments | | | | | | | | | | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SEC. AMENDMENT 02/18/2009 | | * | | * | | * | |
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| Total Claims | | | | | | Total Claims | | | | | | |

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Part of Paper No20090310-1.

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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

10/530,643

Filing Date

07 April, 2006

Applicant(s)

CAYOUETTE ET AL.

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| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SEC. AMENDMENT 02/18/09 | | * | | * | | * | |
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